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S. Cirone

7. PERFORMING ORGANIZATION NAME(S) & ADDRESS(ES)

Assistant Secretary of Defense for Health Affairs
1200 Defense Pentagon
Washington, DC 20301-1200

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This Directive replaces ADA-272313.

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13. ABSTRACT (Maximum 200 Words)

This Directive reissues DoD Directive 5154.24, dated April 10, 1992, for the administration and management of AFIP in accordance with Title 10, United States Code, and replaces DoD Directives 5154.11, 6010.16, and 6465.2. This Directive designates the Secretary of the Army as the DoD Executive Agent (EA) for AFIP.

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Department of Defense
DIRECTIVE

October 28, 1996
NUMBER 5154.24

SUBJECT: Armed Forces Institute of Pathology (AFIP) ASD(HA)

References: (a) DoD Directive 5154.24, "Armed Forces Institute of Pathology (AFIP)," April 10, 1992 (hereby canceled)
(b) Sections 131, 136, 176, 177, 2012, 2601, 4711, 5013, 9711 of title 10, United States Code
(c) DoD Directive 5154.11, "Joint Committee on Aviation Pathology," September 12, 1988 (hereby canceled)
(d) DoD Directive 6010.16, "Armed Forces Medical Examiner System," March 8, 1988 (hereby canceled)
(e) through (h), see enclosure 1

A. REISSUANCE AND PURPOSE

This Directive:

1. Reissues reference (a) for the administration and management of AFIP in accordance with reference (b), and replaces references (c), (d) and (e).

2. Designates the Secretary of the Army as the DoD Executive Agent (EA) for AFIP.

B. APPLICABILITY

This Directive applies to the Office of the Secretary of Defense, the Military Departments, the Combatant Commands, the Defense Agencies, and the DoD Field Activities.

C. POLICY

It is DoD policy that:

1. AFIP shall be a joint entity of the three Military Departments, subject to the authority, direction, and control of the Assistant Secretary of Defense for Health Affairs (ASD(HA)).

2. AFIP shall consist of the following:

a. A Board of Governors (BoG), established and operated in accordance with reference (b) and DoD Directive 5105.18 (reference (f)).

b. A Director, two Deputy Directors, and one Associate Director (the Director, Center for Advanced Pathology) appointed by the ASD(HA) on the basis of high professional qualifications

in the field of pathology and demonstrated medical administrative ability.

c. An Armed Forces Medical Examiner (AFME), appointed by the Director, with the concurrence of the BoG, from among qualified, board-certified, forensic pathologists for a four-year term, which may be renewed.

d. A staff of professional, technical, administrative, and clerical personnel.

e. A Scientific Advisory Board (SAB) established by the ASD(HA), in accordance with DoD Directive 5105.4 (reference (g)). The SAB shall advise the Director of the AFIP and shall meet at least semiannually to provide peer review and guidance for the AFIP Scientific Program. Board members shall be nominated by the Director, reviewed by the BoG, and approved by the ASD(HA).

3. Administrative issues, proposed budgets, and staffing requirements shall be presented by the Director of the AFIP to the BoG for review. Budgets approved by the BoG shall be presented by the EA to the Defense Health Program as part of the planning, programming, and budgeting execution system process. Approved staffing requirements shall be incorporated in a joint staffing document by the EA with appropriate participation of the other Military Departments. Military members assigned to AFIP shall be responsible to the Director of the AFIP for performance of duty.

4. The AFIP mission and functions shall be to:

a. Serve as a national and international resource of pathology knowledge and experience supporting both the military and civilian sectors, including functioning as the chief reviewing authority on the diagnosis of pathologic tissue for the Armed Services, and conducting experimental, statistical, and morphological research and investigation in the field of pathology, concentrating on subjects at the forefront of the field of pathology.

b. Support the AFME System, subject to the authority, direction, and control of the ASD(HA), under the direction of the AFME, according to applicable authorities under 10 U.S.C. (reference (b)), to conduct scientific forensic investigations for determining the cause and manner of death under appropriate circumstances, forensic toxicology services (including the drug testing quality control programs, proficiency testing programs, and consultation services to the Department of Defense for the military drug testing program), other forensic science services, and consultation and support to other Government Agencies.

(1) The AFME shall have the authority to order a medicolegal investigation, to include an autopsy, of the death of any Service member on active duty or member of the Reserve components on active duty for training where the Federal Government has exclusive jurisdiction, and where the circumstances surrounding the death are suspicious, unexpected, or unexplained.

(2) Any civilian who dies in an area of exclusive U.S. jurisdiction under the control of the Department of Defense may be the subject of a medicolegal investigation, to include autopsy, when requested by competent authority, in accordance with applicable statutory

authority under 10 U.S.C. (reference (b)).

(3) In areas where the United States does not have exclusive jurisdiction, but where the AFME believes a medicolegal investigation is needed in relation to the death of any Service member or other person with a relationship to the Department of Defense sufficient to establish a DoD interest in a medicolegal investigation, the AFME shall seek the assistance and cooperation of authorities who exercise such jurisdiction for the conducting of such investigation.

(4) When requested by another Federal Agency, acting pursuant to appropriate authority, the AFME is authorized to provide assistance to such Agency, to the extent otherwise allowed by law, in the conduct of mediolegal investigations, including autopsies.

(5) When requested by appropriate civil authorities to assist in conducting other medicolegal investigations, including autopsies, the AFME is authorized to provide support to eligible organizations outside the Department of Defense, consistent with Section 2012 of reference (b).

(6) Consent of the next of kin is not required for any medicolegal investigation carried out under any applicable compulsory authority.

(7) The AFME shall receive notification of the deaths of all Service members on active duty and active duty for training, and shall have the authority to review all medical records, investigative reports, photographs, evidence, x-rays, medical and dental records, and all retained pathologic materials on any autopsy performed in a DoD medical facility.

c. Provide, under the direction of the AFME, scientific expertise related to identification of remains through the Armed Forces Repository of Specimen Samples for Identification of Remains and the Armed Forces DNA Identification Laboratory (AFDIL).

(1) The Armed Forces Repository of Specimen Samples for the Identification of Remains shall store deoxyribonucleic acid (DNA) reference specimens and maintain a database to assist in their retrieval for human remains identification. The repository shall implement special rules and procedures to assure the protection of privacy interests in the specimen samples and any DNA analysis of those samples in accordance with subsection C.5., below. The repository shall develop, purchase and distribute unique DNA collection supplies to DoD active and Reserve component units for collecting DNA reference specimens.

(2) The Military Services, and not the repository, are responsible for implementing mandatory requirements for all military personnel to provide a specimen sample for the repository, and for providing guidance for collection of new accessions entering the Military Services of all Military Service residual active component personnel by December 31, 1998; and all Military Service residual Reserve component personnel by December 31, 1999. The Military Services shall ensure that Service members, as well as DoD civilian employees and contractor personnel who accompany U.S. military forces, are not deployed without collection of a DNA reference specimen. Under the procedures established by the Military Services, the provision of

specimen samples by military members shall be mandatory.

(3) Provision may be made, as appropriate, for the accession to the repository of specimen samples from those civilian employees and contractor personnel who participate in operational deployments.

(4) The AFDIL shall perform necessary DNA testing for human remains identification from current and prior conflicts and other authorized casework in accordance with the AFIP mission of consultation, education, and research.

d. Contract with the American Registry of Pathology for cooperative efforts between AFIP and the civilian medical profession, according to guidelines in 10 U.S.C. 176 (reference (b)), and under such conditions that support AFIP mission and that have been reviewed by the BoG and approved by the ASD(HA).

e. Support DoD medical quality assurance programs and risk management activities by maintaining appropriate records and data systems and providing to ASD(HA) statistical and other informational reports concerning all administrative claims and legal actions arising from allegations of negligence by the DoD medical system and adverse professional actions taken against DoD healthcare providers, by rendering secondary medical opinion on medical legal claims on request from the Military Services or other Federal Agencies, and by providing continuing medical education in risk management to Federal healthcare providers.

f. Maintain medical illustration services for collecting, preparing, duplicating, printing, publishing, exhibiting, referencing, and filing of medically important illustrative material, except original motion picture footage. That service may be made available to the medical services of the Military Services, other Federal Agencies, and qualified individuals in accordance with DoD Directive 4000.19 (reference (h)).

g. Maintain the National Museum of Health and Medicine to:

(1) Collect, preserve, and interpret the national collection of medical artifacts, pathological and skeletal specimens, and archival resources to be utilized for instruction, research, public health, environmental medicine, medical intelligence, and medical surveillance by qualified and authorized persons.

(2) Develop and present exhibitions and public programs and participate in informational activities that are relevant to DoD functions and that improve the understanding of medical history, medical science, disease prevention, and health education.

h. Maintain Repository and Research Services to access and track all case records and materials provided to AFIP into a permanent repository and central database, including pathologic material received from military medical treatment facilities closed under base realignment and closure, and to carry out collaborative research efforts with outside agencies in the areas of public health, epidemiology, and other fields of significant pathologic interest.

i. Provide educational programs in pathology and other areas of medicine for military and civilian participants throughout the United States and foreign countries, and maintain a medically current collection of study materials, which may be made available to military and civilian physicians through interlibrary loans.

5. The Armed Forces Repository of Specimen Samples for the Identification of Remains shall implement special rules and procedures to ensure the protection of privacy interests in the specimen samples and any DNA analysis of those samples. These special rules and procedures shall include at least the following:

a. Specimen samples may be used only for the following purposes:

(1) Identification of human remains;

(2) Internal quality assurance activities to validate processes for collection, maintenance and analysis of samples;

(3) A purpose for which the donor of the sample (or surviving next-of-kin) provides consent; or

(4) As compelled by other applicable law in a case in which all of the following conditions are present:

(a) The responsible DoD official has received a proper judicial order or judicial authorization;

(b) The specimen sample is needed for the investigation or persecution of a crime punishable by one year or more of confinement;

(c) No reasonable alternative means for obtaining a specimen for DNA profile analysis is available; and

(d) The use is approved by the ASD(HA) after consultation with the General Counsel of the Department of Defense.

b. A routine destruction schedule shall be followed, under which samples will be retained for not more than 50 years. A procedure shall also be established and maintained under which individual specimen samples will be destroyed upon the request of the donor following the conclusion of the donor's complete military service obligation or other applicable relationship to the Department of Defense. (Complete military service is not limited to active duty service; it includes all service as a member of the Selected Reserve, Individual Ready Reserve, Standby Reserve or Retired Reserve.) Upon receipt of such a request, the sample shall be destroyed within 180 days and notification of the destruction sent to the donor.

c. No duplicate specimen samples shall be held separately from the central repository.

6. The AFIP shall serve as the proponent agency for the Joint Committee on Aviation Pathology (JCAP), which shall be concerned with the role of pathology as applied to aviation and flight safety in coordination with the Military Services of the United States, the United Kingdom, and Canada. The JCAP shall include two representatives from each U.S. Military Service, appointed by the Secretaries of the Military Departments, and two representatives each from the Military Services of the United Kingdom and Canada. The Director, AFIP, shall appoint two AFIP representatives to serve as members, one of whom will serve as Secretary, with the consent of the JCAP. The AFIP shall provide administrative support and maintain permanent records for JCAP. Technical information may be disseminated through the JCAP in the form of technical reports, publications in scientific journals, lectures, and workshops.

7. AFIP shall staff a Clinical Laboratory Improvement Program (CLIP) Office that shall serve as the DoD Clinical Laboratory Improvement Amendment program manager to provide quality assurance, develop regulations, certify appropriate clinical laboratory testing sites, oversee the performance of clinical laboratory proficiency testing, perform complaint inspections, and establish and monitor programs to provide CLIP compliance.

D. RESPONSIBILITIES

1. The Assistant Secretary of Defense for Health Affairs, under the Under Secretary of Defense for Personnel and Readiness, shall monitor compliance with this Directive.

2. The Secretary of the Army, as the DoD EA for the AFIP, shall:

a. Administer the budget, personnel, information, facilities, and other resources required to support the mission and functions of AFIP.

b. Ensure that the Director, AFIP, shall, subject to the authority, direction and control of the ASD(HA), have authority, direction, and control of AFIP, and shall report to the ASD(HA).

3. The Secretaries of the Military Departments shall support the activities of the AFIP, as carried out under this Directive, and provide personnel support as established in the Joint Manning Document.

E. EFFECTIVE DATE

This Directive is effective immediately.

John P. White
Deputy Secretary of Defense

Enclosure
References

REFERENCES, continued

(e) DoD Directive 6465.2, "Organ Disposal After Autopsy," July 25, 1986 (hereby canceled)
(f) DoD Directive 5105.18, "DoD Committee Management Program," January 18, 1990
(g) DoD Directive 5105.4, "Department of Defense Federal Advisory Committee Management Program," September 5, 1989
(h) DoD Directive 4000.19, "Interservice, Interdepartmental, and Interagency Support," April 15, 1992